

MISSOURI DEPARTMENT OF HEALTH STATE PUBLIC HEALTH LABORATORY

RECEIVED DAYS Broath Accord Program
By Carol Day at 10:34 am, Aug 20, 2009

DATAMASTER MAINTENANCE REPORT

Complete this report in duplicate at th is repaired. Send copy to Department of	e time of the Health: retain	regulai n origina	r monthly prev	entive main t file.	tenance ch	eck, ar	nd whenever ins	rument
DATAMANTED ON							INSPECTION	
202004 LOCATION OF INSTRUMENT (STREET AND CITY) G.	REENE O	COUNT	Y JAIL	23 768			09/2009 INSPECTION	
/800 N, BOONEVILLE AVE, CHECKLIST: Place a check (V) to the	SPRIEN	GFIA	ELD, MO.	65802		101	O HOURS	
CHECKLIST: Place a check (✓) to the I in observed values where determined.) U	eft of each it Inchecked ite	em if for ms mus	und to be satis t be corrected t	factory or if before using	operating instrument	within e	established limits	. (Write
☑ DIAGNOSTIC CHECK (PRINTOUT	ATTACHED)							
₽ COMPUTER			Ø. DETEC	TOR				
PROGRAM			FILTER	S				
A HEATERS SAMPLE CHAMBER	<u>49</u> °c		QUART	Z STANDA	RD			
☐FLOW DETECTOR			Z CALIB	RATION				
A PUMP HIGH SPEED			PRINTE	≅R				
X INDICATOR LIGHTS								
☑ TIME AND DATE								
⊠ SIMULATOR TEMPERATURE (34 °C	C ± 0.2°C)							
(CALIBRATION CHECK -								
Run three tests using a standard s spread of .005 or less. Check the b RECIRCULATION PUMP)	colution. All ox correspon	three te iding to	sts must be w the standard s	ithin ± 5% solution beir	of the staring used. (P	idard v RINTO	ralue and must in OUT ATTACHED	nave a (USE
.⊠.0.100% STANDARD - MUST REA □ 0.040% STANDARD - MUST REA (ONLY ONE STANDARD IS TO BE I	D BETWEEN	0.038%	and 0.042% IN	CLUSIVE				
TEST 1 0.095	TEST 2	*	0,096		TEST 3	_ (0,097	
PERFORM R.F.I. TEST (PRINTOUT	ATTACHED)				,			
NUMBER OF REFUSALS, SINCE LA FOLLOWS: (DO NOT INCLUDE S			EPORT, AND I	NUMBER OF	BREATH	TESTS	IN EACH RANG	E AS
REFUSALS 6 (004)	(.0509)		(.1014)				(Over .19)	/
List any new parts and describe any alte			n that was ma	de to restor	e the instru	ıment t	to operate satisfa	ectorily
and within established limits (use other si	de if necessa	ry) ~~ #	08340	Ex I	nat	6	10-15-20	09
DILO SOLUTDON	NC, L	<u>v/</u>	0001	1.70	.I		, , , , , ,	
3001700								
naect.	70 10 10	- A)	C A 0 .	- na= 1	,,,,,,	.,		
MEETS	VID # 5 5	>(/\.\.	2Q V 2/K/	<u> </u>	/ 3			
INSPECTING OFFICER			PRINT NAME				. •	
SIGNATURE COLOR TO CALLET			LIMAT HAME	KIDI	WALT	ER	5	i
TYPE II PERMIT NUMBER/EXPIRATION DATE			TELEPHONE NU	MBER				



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 08340 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1211 percent (w/vol) ethyl alcohol. The expiration date for this lot number is October 15, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and wat used in this solution were free of test interfering substances.

fed L. Pauley, President GUTH LABORATORIES, INC.

BAC DataMaster Evidence Ticket

BAC DATAMASTER SERIAL NUMBER 202004 MISSOURI STATE HIGHWAY PATRO 68/68/88

EXPIRATION DATE: 06/24/10 PERMIT NUMBER: 820203 OFFICER I.D.: 674 MISCELLANEOUS DATA: TESTING OFFICER: MONTHLY MAINTENANCE WALTERS/K/D

--- SUPERVISOR MODE ---

BLANK TEST	EXTERMAL STANDARD	BCBNX TENT	EXTERNAL STANDARD	BLBZK TMOT	EXTERNAL STANDARD	INTERNAL STANDARD	BLANK TEST	
. ଜନ୍ମନ	. 207		0 0 0	. ଅନ୍ତର	10 10 10 10	WERIFIED	99 9	
10:16	10:16	12. 12.	10:15	10:10	10:14	4	e E	

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

BAC DATAMASTER SERIAL NUMBER 202004 MISSOURI STATE HIGHWAY PATROL 68/68/68 19:19

PIRONOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM:

989

HEATERS

SAMPLE CHAMBER:

00 00 01

FLOW DETECTOR:

909Y

PUMP

HIGH SPEEDS

DETECTOR:

OKAY

OKAY

OKAY

FILTERO:

QUARTZ STANDARD:

OKAY

CALIBRATION:

D G " HIS

OKAY

pqrstuvwxyz(|)+ HILKEMNOP@RSTUVWXYZ[/]^_ abodefghijklmno !"#\$%%'()*+,-./0123456789:;<=>?@ABCDEFG PRINTER TEST

Operator Signature

Printed on recycled paper with agri-based inks

CMSU 2208-02

Printed on recycled paper with agri-based inks Operator Signature

CMSU 2208-02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

BAC INTAMASTER SERIAL NUMBER 202004 MISSOURI STATE HIGHWAY PATROL 68/68/88

EXPIRATION DATE: 06/24/10 OFFICER I.D.: 674 MISCELLANEOUS DATA: PERMIT NUMBER: 820203 DEFICER I.D.: 674 TESTING DEFICER: STATE/D.L.: MO/123456789 ARRESTING OFFICER: SUBJECT NAME: ARREST TIME: 09:45 DOB: 11/11/11 RFI TEST **新聞** WALTERSYKYD DOE/J/J WMX: X

--- BREATH ANALYSIS ---

RADIO INTERFERENCE BLANK TEST INTERNAL STANDARD

19:19 19:19

WERIFIED

19:09

Operator Signature Mek

CMSU 2208-02

Printed on recycled paper with agri-based inks

State of Missouri DEPARTMENT OF HEALTH



PERMIT TYPE II



KENNETH	LD. WALTERS
is hereby authorized to instruct an calibrate, perform field repairs, and o	nd supervise operators, train instructors, inspect, perate the following breath analyzer(s):
DATAMAS	TER
for the determination of the alcoholic air. Issued under the provisions of sec	content of blood from a sample of expired (alveolar) ctions 577.020 through 577.041, RSMo 1986.
Date06/24/08	This C Bor Continue
Number _ 820203	Director of State Public Health Laboratory
Expires <u>06/24/2010</u>	
MO 580-0771 (7-88)	Director, Department of Health Leb. 4 (R7-88)